PTO/SB/31 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork 🗗 eduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number NOTICE OF APPEAL FROM THE EXAMINER TO Docket Number (Optional) THE BOARD OF PATENT APPEALS AND INTERFERENCES 449122021000 In re Application of Thomas FRANZ Application Number Filed 10/049,865 June 6, 2002 For CIRCUIT AND METHOD FOR DETERMINING THE OFFSET ERROR OF A MEASUREMENT OF THE COIL CURRENT OF AN **ELECTROMAGNETIC ACTUATOR** Art Unit Examiner 2858 D.M. Lair Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) 500.00 Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 03-1952 . I have enclosed a duplicate copy of this sheet, A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. I am the applicant /inventor. Signature assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) Kevin R. Spivak is enclosed. (Form PTO/SB/96) Typed or printed name attorney or agent of record. Registration number (703) 760-7762 Telephone number attorney or agent acting under 37 CFR 1.34. 43,148 December 23, 2004 Registration number if acting under 37 CFR 1.34. Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

12/6767 034 EABUBAK1 00000018 031952 10049865

\*Total of

02 Fras 401

500.00 DA

forms are submitted.

PTO/SB/17 (12-04)
Approved for use through 7/31/2006. OMB 0651-0032
rademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.				
Effective on 12/08/2004.	Complete if Known			
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/049,865		
FEE TRANSMITTAL	Filing Date	June 6, 2002		
For FY 2005	First Named Inventor	Thomas FRANZ		
T01112000	Examiner Name	D.M. Lair		
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2858		
TOTAL AMOUNT OF PAYMENT (\$) 500.00	Attorney Docket No.	449122021000		
METHOD OF PAYMENT (check all that apply)				
Check Credit Card Money Order Other (please identify):				
x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee				
Charge any additional fee(s) or any underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17				
FEE CALCULATION				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES				
		NATION FEES		
Small Entity Application Type Fee (\$) Fee (\$)	Small Entity Fee (\$) Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	
Utility 300 150 500	250 200	100	0.00	
Design 200 100 100	50 130	65	0.00	
Plant 200 100 300	150 160	80	0.00	
Reissue 300 150 500	250 600	300	0.00	
Provisional 200 100 0	0 0	0	0.00	
				ntity
Fee Description Fee (\$) Fee (\$)				
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25				
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100				
Multiple dependent claims	)_:_! (A)	360 18	U	
	Paid (\$) Multiple Depender			
=0_x	).00 <u>F</u>	ee (\$) <u>F</u>	ee Paid (\$)	
Indep. Claims Extra Claims Fee (\$) Fee F	 Paid (\$)			
	0.00			
3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)				
100 = /50 (round up to a whole number) x =				
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)				
Other: NOTICE OF APPEAL - \$500.00 \$500.00				
SUBMITTED BY // // // // // // // // // // // // //				
Signature	Registration No. 43,148	Telephone	(703) 760-7762	-
(Autorie)/Ageill)				
Name (Print) Pee Kevin R. Spivak Date December 23, 2004				